

# ORDER FOR SUPPLIES OR SERVICES

PAGE 1 OF 3

**IMPORTANT: Mark all packages and papers with contract and/or order numbers.**

1. DATE OF ORDER 08/26/2004		2. CONTRACT NO. (If any) GS-25F-0110M		6. SHIP TO: Jerome D. Davis	
3. ORDER NO. DTMA1F04101		4. REQUISITION/REFERENCE NO. PR300040144		a. NAME OF CONSIGNEE DOT/Maritime Administration, MAR-313	
5. ISSUING OFFICE (Address correspondence to)  DOT/Maritime Administration, MAR-380 400 Seventh Street, SW., Room 7310  Washington DC 20590				b. STREET ADDRESS 400 Seventh Street, SW., Room 7313	
				c. CITY Washington	d. STATE DC
				e. ZIP CODE 20590	
7. TO: a. NAME OF CONTRACTOR				f. SHIP VIA	
b. COMPANY NAME NEOPOST INC				8. TYPE OF ORDER	
c. STREET ADDRESS 30955 HUNTWOOD AVE				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.	
d. CITY HAYWARD		e. STATE CA	f. ZIP CODE 94544-7040	<input checked="" type="checkbox"/> b. DELIVERY - Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
9. ACCOUNTING AND APPROPRIATION DATA - - 4750 - 1 - 04 - 010 - - GAJ016 - 131000 - - 2338 - - - - -				10. REQUISITIONING OFFICE DOT/Maritime Administration, MAR-313	

11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED				
12. F.O.B. POINT Destination		14. GOVERNMENT B/L NO.	15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)	16. DISCOUNT TERMS  10 days % 20 days % 30 days % days %
13. PLACE OF				
a. INSPECTION	b. ACCEPTANCE			

## 17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<b>SEE LINE ITEM DETAIL</b> Remit Checks to: U.S. Postal Service, P.O. Box 0575, Carol Stream, IL 60132 <u>OR</u> Wire Transfer: Citibank, CMRS/Neopost, Acct: 4067-8625, Routing: 021000089, Customer Acct: 30674428					
SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.			17(h) TOT. (Cont. pages)
	21. MAIL INVOICE TO: Ruby P. McPhaul					
	a. NAME DOT/Maritime Administration, MAR-330					17(i) GRAND TOTAL
	b. STREET ADDRESS (or P.O. Box) 400 Seventh Street, SW., Room 7325					
	c. CITY Washington	d. STATE DC	e. ZIP CODE 20590		\$20,000.00	

22. UNITED STATES OF AMERICA BY (Signature)

*Erica L. Williams*

23. NAME (Typed)  
Erica L. Williams  
TITLE: CONTRACTING/ORDERING OFFICER

**PAGE NO.** 2 of 3

## RECEIVING REPORT

SHIPMENT	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
NUMBER	FINAL				
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

[illegible]

ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION

PAGE NO.  
3 of 3

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER 08/26/2004		CONTRACT NO. GS-25F-0110M		ORDER NO. DTMA1F04101		
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	Postage-On-Call (Account #30674428)  Funding for Neopost on call for the following regions: North Atlantic, Central, Western, Great Lakes, and South Atlantic  Reference Requisition: PR300040144	1.00	NTE	20,000.000	20,000.00	
TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ➡ \$20,000.00						